Form Approved: OMB No. 1512-0188 (1/31/86)

DEPARTMENT OF THE TREASURY—BUREAU OF ALCOHOL, TOBACCO AND FIREARMS

## SIGNING AUTHORITY FOR CORPORATE OFFICIALS

| INSTRUCTIONS  |   |  |  |
|---|---|--|--|
| Prepare and submit to the Regional Regulatory Administrator, Bureau of Alcohol, Tobacco and Firearms, in duplicate. Each copy must be signed in ink by a corporate official and be embossed with the corporate seal. This form may be used to list the corporate officials, or employees (if any), who are authorized by the articles of incorporation, the bylaws, or the board of directors in adopted resolutions or motions, to act on behalf of the corporation or to sign its name. If the authorization to sign is granted by position title, rather than to specific individuals by name, a new authorization will not be needed each time a change of incumbent occurs. WHERE THE AUTHORIZATION IS NOT GRANTED BY THE ARTICLES OF INCORPORATION, THE BYLAWS, OR ACTION BY THE BOARD OF DIRECTORS, ATF FORM 1534 (5000.8) POWER OF ATTORNEY, MUST BE SUBMITTED. |   |  |  |
| PAPERWORK REDUCTION ACT NOTICE  |   |  |  |
| This request is in accordance with Section 3507, Public Law 96-511, December 11, 1980. This information collection is used by ATF to ensure that only duly authorized individuals are signing documents. This information is voluntary.   |   |  |  |
| NAME AND COMPLETE ADDRESS OF CORPORATION  | COMPLETE APPLICABLE INFORMATION             |  |  |
|   | ☐ NEW APPLICANT ☐ PERMIT HOLDER             |  |  |
|   | PERMIT NO.                                  |  |  |
| BOARD MEETING   | DATE MEETING HELD                           |  |  |
| ☐ DIRECTORS ☐ TRUSTEES ☐ MANAGERS ☐ GOV<br>THE FOLLOWING CORPORATE OFFICIALS, EMPLOYEES, OR INCUMBEN  | VERNORS                                     |  |  |
|   |   |  |  |
| I certify that this is true and complete and that the above authorization was g   | granted at the cited meeting CORPORATE SEAL |  |  |
| of the board.  SIGNATURE  |   |  |  |
|   |   |  |  |
| TITLE   | DATE  |  |  |

| I certify that this is true and complete and that the above authorization was granted at the cited meeting of the board. |      | CORPORATE SEAL |  |
|--|------|----------------|--|
| SIGNATURE  |      |                |  |
| 513.11.11.21.2   |      |                |  |
|  |      |                |  |
|  |      |                |  |
|  |      |                |  |
| TITLE  | DATE |                |  |
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